

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: SYNCHRONIZATION AND CALIBRATION OF
CLOCKS FOR A MEDICAL DEVICE AND
CALIBRATED CLOCK

Attorney Docket Number:: 11738.00151

Request for Early Publication?: NO

Request for Non-Publication?: NO

Suggested Drawing Figure:: 15

Total Drawing Sheets:: 33

Small Entity?: NO

Latin name::

Variety denomination name::

Petition included?: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ivan
Middle Name::
Family Name:: Osorio
Name Suffix::
City of Residence:: Leawood
State or Province of Residence:: KS
Country of Residence:: US
Street of mailing address:: 4005 W. 124th Street
City of mailing address:: Leawood
State or Province of mailing address:: KS
Country of mailing address:: US
Postal or Zip Code of mailing address:: 66209

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Naresh
Middle Name:: C.
Family Name:: Bhavaraju
Name Suffix::
City of Residence:: Mission
State or Province of Residence:: KS
Country of Residence:: US
Street of mailing address:: 6909 W. 51st Place
Apt. 3b
City of mailing address:: Mission
State or Province of mailing address:: KS
Country of mailing address:: US

Postal or Zip Code of mailing address:: 66202

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Thomas

Middle Name:: E.

Family Name:: Peters

Name Suffix::

City of Residence:: Lawrence

State or Province of Residence:: KS

Country of Residence:: US

Street of mailing address:: 1300 Rhode Island Street

City of mailing address:: Lawrence

State or Province of mailing address:: KS

Country of mailing address:: US

Postal or Zip Code of mailing address:: 66044

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Mark

Middle Name:: G.

Family Name:: Frei

Name Suffix::

City of Residence:: Lawrence

State or Province of Residence:: KS

Country of Residence:: US

Street of mailing address:: 2513 Via Linda Drive

City of mailing address:: Lawrence

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State or Province of mailing address:: KS
Country of mailing address:: US
Postal or Zip Code of mailing address:: 66047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: C.
Family Name:: Werder
Name Suffix::
City of Residence:: Corcoran
State or Province of Residence:: MN
Country of Residence:: US
Street of mailing address:: 23160 Meadowview Drive
City of mailing address:: Corcoran
State or Province of mailing address:: MN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 55374

Correspondence Information

Correspondence Customer Number:: 22908

Representative Information

Representative Customer Number:: 22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/503,795	09/19/03
This Application	Non-Provisional of	60/418,446	10/15/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Medtronic, Inc.
Street of mailing address::	710 Medtronic Parkway, NE MS-LC340
City of mailing address::	Mineapolis
State or Province of mailing address::	MN
Country of mailing address::	US
Postal or Zip Code of mailing address::	55432